



# CONFRONTING A RELENTLESS ADVERSARY



## A PLAN FOR SUCCESS

For over seventeen years, the California Tobacco Control Program has done battle with the tobacco industry, a formidable and relentless adversary. In the process, California has achieved many important public health victories: adult per capita consumption has declined by over 60 percent (lowest in the nation); as of 2004, the adult smoking prevalence rate had reached an historic low of 15.4%; the majority of California's smokers are occasional or light smokers; and the vast majority of California's workers are now protected from second-hand smoke in their places of employment.

Because of this progress, the revenues generated by the state's tobacco tax have, appropriately, fallen as cigarette consumption has decreased, thereby reducing the amount of funding available for tobacco control under the Tobacco Tax and Health Protection Act (Proposition 99). At the same time, inflation has substantially reduced the purchasing power of tobacco control dollars. Meanwhile, the tobacco industry has dramatically increased its advertising and promotional spending in California. The convergence of these factors has rendered the California Tobacco Control Program less competitive with the tobacco industry than it once was.

This lack of competitiveness is important because the declines in smoking and secondhand smoke exposure have not been shared equally across all of California's diverse communities. Low income Californians, communities of color, the Lesbian, Gay, Bisexual, and Transgender (LGBT) community, enlisted military personnel, and other populations continue to have disproportionately high rates of tobacco use and therefore suffer disproportionately from tobacco-related morbidity and mortality.

Achieving further significant reductions in smoking prevalence and secondhand smoke exposure across all population groups and geographic regions of the state is a public health imperative that requires a strong tobacco control program—and a strong tobacco control program requires adequate funding.

Twice in the last seventeen years, Californians have voted to increase the tobacco tax to promote public health. In 1988, Proposition 99's tax increase of 25 cents per pack of cigarettes allowed California to create the nation's first comprehensive tobacco control program, and in 1998, California voters again agreed to raise the tobacco tax to fund early childhood development programs. With that 50 cents per pack tax, the state's per pack tax became the current 87 cents. In the intervening years, many other states have enacted substantial tax increases, and, as a result, California now

ranks 23rd among states by cigarette tax rate. Therefore, we reiterate what we stated in the 2003-2005 Master Plan: TERO strongly supports a significant increase in the tobacco tax of at least \$1.50 per pack of cigarettes coupled with an allocation of at least 20 cents per pack, indexed to inflation, to the tobacco control program.

A sizable tobacco tax increase in concert with a reinvigorated tobacco control program will improve the health status of Californians, save lives, and help offset the economic costs of smoking to the state by significantly decreasing smoking prevalence and cigarette consumption, as well as further protect nonsmokers from secondhand smoke and advance research on the prevention, detection, and treatment of tobacco-related diseases. With a strengthened tobacco control program in place and a reversal of the recent trend of decreased funding, an adult smoking prevalence rate of ten percent is well within reach in the next three years.

The tobacco industry will not stand still. Without the countervailing efforts from the state's tobacco control program, the gains made against tobacco use will be lost. Now is the time for an increased investment in the California Tobacco Control Program and a renewed commitment to the vision of a tobacco-free California.

Kirk Kleinschmidt, Chair  
March 2006

# TOWARD A TOBACCO-FREE CALIFORNIA 2006 - 2008



## EXECUTIVE SUMMARY

Since the passage of the Tobacco Tax and Health Protection Act (Proposition 99) in 1988, California has made tremendous gains against tobacco use—prevalence has decreased, per capita tobacco consumption has declined, illegal sales of tobacco to youth have decreased, the vast majority of workers are protected from secondhand smoke in their places of employment, public attitudes have shifted, and tobacco-related disease and death have decreased. In short, the California Tobacco Control Program is working.

Tobacco control work in California is not finished, however. As children move into their teen years, high school children move into young adulthood, and newcomers join the state's population, the tobacco industry is actively targeting each potential new smoker through ever larger and more aggressive advertising and promotional strategies. In fact, the amount of money being spent in California by tobacco compa-

nies for promotional activities alone is twenty times the entire budget of the California Tobacco Control Program (FTC 2005).

The tobacco industry has proven itself to be a formidable opponent, and yet, the Tobacco Education and Research Oversight Committee (TEROC) firmly believes that, with appropriate funding for the California Tobacco Control Program, California can achieve the intermediate goals set forth in this Master Plan: an adult smoking prevalence rate of ten percent among adults and a smoking prevalence rate among high school-age youth of eight percent by the end of 2008. In order to reach these goals, funding for the California Tobacco Control Program must be returned to the level intended by the voters who passed Proposition 99. Now is the time to increase the tobacco excise tax by at least \$1.50 per pack of cigarettes in order to maintain the significant health gains made by the

California Tobacco Control Program. It is critical that the program have the fiscal strength to be competitive against the tobacco industry's relentless and effective marketing strategies.

In this Master Plan, TERO, pursuant to its legislative mandate (California Health and Safety Code Sec-

tions 104365-104370), reviews the California Tobacco Control Program's progress during the previous three years, renews the call for an increase in the tobacco tax, and sets forth five objectives that constitute a plan for success against the tobacco industry—tobacco control's relentless adversary.

## Progress toward a Tobacco-Free California in 2003-2005

- The 2003-2005 Master Plan proposed a goal for an adult smoking prevalence rate of 13 percent by the end of 2005. As of 2004 (the most recent data available), California's adult smoking prevalence rate reached an historic low of 15.4 percent, which represents a 32.5 percent decrease since 1988.
- Per capita consumption of cigarettes declined by over 60 percent from 1988 to 2004. Californians now smoke approximately half as many cigarettes as smokers in the rest of the United States.
- The smoking rate among 18 to 24-year-olds declined to 18.3 percent in 2004, down from 22.2 percent in 2003.
- California saw a significant drop in the smoking prevalence rate among high school age youth: The smoking prevalence rate for that group was 16.0 percent in 2002 and 13.2 percent in 2004 (compared to a 2004 national rate of 22.3 percent).
- Illegal statewide sales of tobacco to minors dropped to 10.2 percent in California in 2005, the lowest level since the state first began monitoring these sales in 1995.
- Reductions in smoking prevalence and cigarette consumption, along with increased protections from secondhand smoke exposure, continue to translate into health benefits for Californians. Accelerated reductions have been documented in California for both heart disease deaths and lung cancer incidence rates (Fichtenberg and Glantz 2000; Barnoya and Glantz 2004).

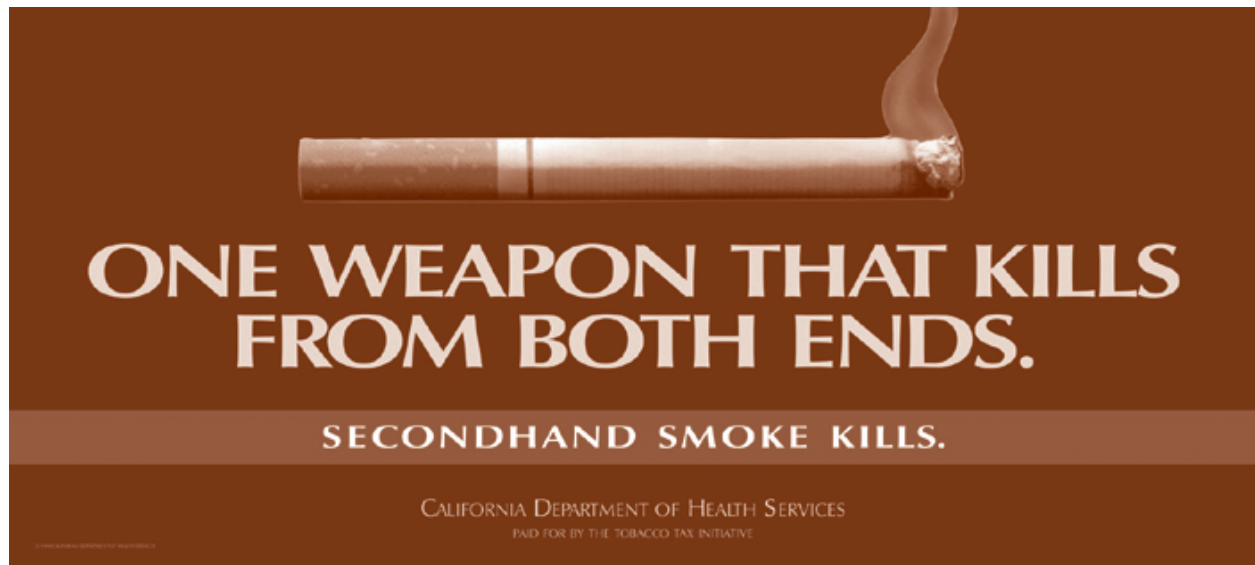


*Training  
2005 Statewide Media Campaign*

## Tobacco Control Challenges Remaining at the End of 2005

While considerable progress was made in the fight against tobacco during the years 2003-2005, several challenges continue to face California, including the following:

- Overall, funding for the California Tobacco Control Program declined from \$110 million in Fiscal Year 2003-04 to \$95.1 million in Fiscal Year 2005-06, thereby diminishing the reach and capacity of the program.
- The state continued to see disproportionately high rates of tobacco use in several of California's immigrant communities, the Lesbian, Gay, Bisexual and Transgender community, the African American community, the American Indian and Alaska Native community, active-duty military, and individuals of low socioeconomic status. The California Tobacco Control Program has identified these as priority populations.
- Notwithstanding significant efforts among the three agencies of the California Tobacco Control



- Program, systemic issues continued to contribute to health-related disparities in general and tobacco-related disparities in particular, such as the need for greater cultural tailoring of programs and further inclusion of priority populations in strategic planning and decision-making processes.
- Most residents of multi-unit housing in California continued to lack protections from secondhand smoke exposure in their homes.
- Access to linguistically and culturally appropriate

cessation services for all who needed them continued to be a challenge for many Californians.

- No meaningful federal regulation of the tobacco industry was enacted.
- The movie industry did not make any significant efforts to reduce levels of smoking in films and the presentation of smoking in films continued to shift down into films designed to be marketed to youth (particularly films rated PG-13).

## Objectives and Supporting Strategies for 2006-2008

### Objective 1: Strengthen the California Tobacco Control Program

California's dramatic strides in reducing tobacco use and protecting nonsmokers from exposure to secondhand smoke are the result of seventeen years of hard work by the California Tobacco Control Program to denormalize tobacco use. Changing the social and cultural attitudes surrounding tobacco use and the tobacco industry through public health education, hard-hitting media campaigns, and the support of state and local policy activities to expand protections against secondhand smoke exposure, restrict tobacco accessibility, and illuminate tobacco industry practices have all contributed to California leading the nation in the fight against the tobacco industry.

However, the gains achieved by the California Tobacco Control Program are in jeopardy. The steady decline in real funding for tobacco control in California has

eroded the California Tobacco Control Program's ability to support innovative local and statewide programs, fund tobacco-related disease research, and implement school-based programs that address the many and varied tobacco control needs in all of California's diverse communities. In short, during the same time that the tobacco industry increased its promotional spending in this state, the resources and the purchasing power of available funds to the California Tobacco Control Program have decreased. In order to meet this Master Plan's goals of an adult smoking prevalence rate of ten percent and a smoking prevalence rate among high school age youth of eight percent, the decline in real tobacco control funding must be reversed. The steady decline in funding has placed the program at a critical juncture.



Based on the median of the U.S. Centers for Disease Control and Prevention's recommended funding level and an assumed inflation rate of three percent, TEROC

recommends that the California Tobacco Control Program be funded at least at the following levels for the next three years:

#### Budget Proposal for the Tobacco Control Program, Fiscal Years 2006-2008

Program Component	Actual FY 05-06 budget (in millions)	Recommended 05-06 budget (in millions)	Recommended 06-07 budget (in millions)	Recommended 07-08 budget (in millions)	Recommended 08-09 budget (in millions)
CDHS/TCS	\$57.8*	\$154.9	\$159.6	\$164.4	\$169.3
TRDRP	\$14.2	\$72.9	\$75.1	\$77.4	\$79.7
CDE/SHKPO	\$23.1	\$76.0	\$78.2	\$80.6	\$83.0
<b>Total</b>	<b>\$95.1</b>	<b>\$303.8</b>	<b>\$312.9</b>	<b>\$322.4</b>	<b>\$332.0</b>

\* \$1.2 million is appropriated from the Prop 99 Unallocated Account to support CDHS/TCS state administration.

### Objective 2: Eliminate disparities and achieve parity in all aspects of tobacco control

TEROC believes that every aspect of the California Tobacco Control Program must be characterized by the integral participation of the many diverse communities that comprise the state's population. TEROC supports the California Tobacco Control Program's continuing

efforts to ensure adequate funding and appropriate representation and participation in all areas of decision-making, research (and its application), strategic planning, and program development.

### Objective 3: Decrease exposure to secondhand smoke

California's nonsmokers continue to be exposed involuntarily to secondhand smoke and burdened by the resulting health consequences. Particular attention is warranted in communities of color (African Americans, American Indians and Alaska Natives, Asian Americans and Pacific Islanders, and Hispanics/Latinos), the Lesbian, Gay, Bisexual and Transgender community, school-age youth, young adults, and the low socioeconomic community—all communities in which cultural and social norms

pose challenges to smoke-free policies and disproportionately high rates of exposure to secondhand smoke occur at work and at home.

“Recognizing  
the need for increased  
revenue, TEROC is repeating the call  
made in the 2003-2005 Master Plan for a  
tobacco tax increase of at least \$1.50 per pack  
of cigarettes, with an allocation of at least  
20 cents per pack to the California  
Tobacco Control Program.”

In order to reduce the disease and death caused by secondhand smoke, TEROC supports the California Tobacco Control Program's continued strong emphasis on protecting all of California's residents against indoor and outdoor secondhand smoke wherever they live, work, study, and play.

### Objective 4: Increase the availability of cessation services

To make significant progress toward a tobacco-free California, the state must achieve an increase in the successful quit rate of current smokers. To that end, TEROC supports the inclusion of cessation services as

a core benefit of all health insurance plans in California. More work also must occur to increase access to culturally and linguistically appropriate cessation services for California's communities of color and other priority populations.

## Objective 5: Limit and regulate the products, activities, and influence of the tobacco industry

In order to effectively regulate and limit the products, activities, and influence of the tobacco industry, local, state, and federal controls must work together to protect people's lives and health from the ill effects of tobacco use. Therefore, TEROC supports strong non-

preemptive federal, state, and local regulation of the tobacco industry at every level of its operation, as well as voluntary restrictions by elected officials, private organizations, and the business community aimed at reducing tobacco industry influence.



Smoking is the number-one killer in the gay & lesbian community – not surprising, since we smoke 70% more than the rest of California. We've won so many battles over the years – now, let's beat tobacco.

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# FREE A TEEN FROM A LIFETIME OF ADDICTION

If you see cigarettes being sold to minors, call

**1-800-5 ASK-4-ID**

Your call is ANONYMOUS.

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Available on the Web at <http://www.dhs.ca.gov/tobacco/html/teroc.htm>